

# THE CITY OF NEW YORK MANHATTAN COMMUNITY BOARD 3

59 East 4th Street - New York, NY 10003 Phone: (212) 533-5300 - Fax: (212) 533-3659 www.cb3manhattan.org - info@cb3manhattan.org

Gigi Li, Board Chair

Susan Stetzer, District Manager

## **Community Board 3 Liquor License Application Questionnaire**

Please bring the following items to the meeting:

NOT	TE: ALL ITEMS MUST BE SUBMITTED FOR APPLICATION TO BE CONSIDERED.									
	Photographs of the inside and outside of the premise.									
_	Schematics, floor plans or architectural drawings of the inside of the premise.									
_										
	residential tenants at location and in buildings adjacent to, across the street from and behind									
	proposed location. Petition must give proposed hours and method of operation. For example:									
	restaurant, sports bar, combination restaurant/bar. (petition provided)  Notice of proposed business to block or tenant association if one exists. You can find									
_	community groups and contact information on the CB 3 website:									
	http://www.nvc.gov/html/mancb3/html/communitygroups/community group listings.shtml									
	Photographs of proof of conspicuous posting of meeting with newspaper showing date.									
	If applicant has been or is licensed anywhere in City, letter from applicable community board									
	indicating history of complaints and other comments.									
	ck which you are applying for:									
× n	ew liquor license									
Cl.										
	ck if either of these apply: ale of assets  upgrade (change of class) of an existing liquor license									
L Sa	ale of assets upgrade (change of class) of an existing liquor license									
Tod	lay's Date: June 28, 2016									
If ap	oplying for sale of assets, you must bring letter from current owner confirming that you									
are	buying business or have the seller come with you to the meeting.									
Is lo	ocation currently licensed?  Yes No Type of license: OP Hotel Dining Room									
If alt	teration, describe nature of alteration:									
	vious or current use of the location:									
Corp	poration and trade name of current license: Holiday Inn									
	PLICANT:									
Prer	mise address: 148-150 Delancey Street									
Cros	ss streets: Clinton Street, Suffolk Street									
Nan	ne of applicant and all principals: Delancey 150 Inc.									
	Donagher, Eamon Donnelly									
Trac	de name (DBA): Holiday Inn									

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PREMISE:							
Type of building and number of floors: Hotel- 8 Stories, Plus Rooftop							
-	Will any outside area or sidewalk cafe be used for the sale or consumption of alcoholic beverages?  (includes roof & yard) ☑ Yes ☐ No If Yes, describe and show on diagram:						
back or side yard u	se?   Yes □ No What is r	ipancy and all appropriate permits, including for any maximum NUMBER of people permitted? Roof TBD					
		e for rooftop to be obtained					
		rmit? ☑ Yes ☐ No (for rooftop)					
		g using map: <a href="http://gis.nyc.gov/doitt/nycitymap/">http://gis.nyc.gov/doitt/nycitymap/</a> -					
please give specific J-1	zoning designation, such	as R8 or C2):					
PROPOSED METH	OD OF OPERATION:						
Will any other busi	ness besides food or alcol	nol service be conducted at premise? 🗖 Yes 🛮 No					
If yes, please descr	ibe what type:						
	osed days/hours of operat onday- Sunday 8am-4am	tion? (Specify days and hours each day and hours of					
	oftop 12am-4am						
Number of tables?	10- Dining Room	Total number of seats? 52- Dining Room					
How many stand-u	p bars/ bar seats are loca	ted on the premise? 1 Stand up bar					
		her with seating or not) over which a patron can order,					
pay for and receive	e an alcoholic beverage)						
Describe all bars (length, shape and location): 1 Straight bar 10 Feet, Rooftop "L" 8ft x 12ft							
	a full kitchen 🛮 Yes 🗖 No						
_		☑ No (If any, show on diagram)					
Is food available fo See copy of menu at	•	, describe type of food and submit a menu					
What are the hours	s kitchen will be open? 6an	 m-3am					
Will a manager or i	orincipal always be on site	e?  Yes  No If yes, which?  Manager, Principal					
	ees will there be? 30	··					
		rs □ accordion doors or □ windows? No					
		Yes, how many?) 4- Dining Room					
	music? ■ Yes ■ No						

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If other type, please describe
What will be the music volume? ■ Background (quiet) ■ Entertainment level
Please describe your sound system: JVC Speakers
Will you host any promoted events, scheduled performances or any event at which a cover fee is
charged? If Yes, what type of events or performances are proposed and how often?
Wedding, Corporate Events
How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. (Please do not answer "we do not anticipate congestion.")  Hotel security will be in front of hotel. Will unload and ask taxis to keep moving.
Will there be security personnel? ■ Yes ■ No (If Yes, how many and when) Two- 4pm-4am
How do you plan to manage noise inside and outside your business so neighbors will not be affected? Please attach plans Principal and security guard will patrol rooftop and ask parespect neighbors; signs will be places on table tops security cameras will be on roofton.
Do you have sound proofing installed? ☐ Yes ☒ No  If not, do you plan to install sound-proofing? ☐ Yes ☒ No  Existing
APPLICANT HISTORY:
Has this corporation or any principal been licensed previously? ■ Yes ■ No
If yes, please indicate name of establishment: Holiday Inn- 585 8th Avenue
Address: Beer Authority- 300 West 40th, Rattle N Hum 14 East 33rd St Community Board #
Dates of operation: Barleycorn, 23 Park Place
If you answered "Yes" to the above question, please provide a letter from the community
board indicating history of complaints or other comments.
Has any principal had work experience similar to the proposed business? ■ Yes ■ No If Yes, please
attach explanation of experience or resume.
Does any principal have other businesses in this area? ■ Yes ■ No If Yes, please give trade name
and describe type of business
Has any principal had SLA reports or action within the past 3 years? ☐ Yes ☒ No If Yes, attach list
of violations and dates of violations and outcomes, if any.

to

establishments selling/serving beer, wine (B/W) or liquor (OP) for 2 blocks in each direction. Please indicate whether establishments have On-Premise (OP) licenses. Please label streets and avenues and identify your location. Use letters to indicate **B**ar, **R**estaurant, etc. The diagram must be submitted with the questionnaire to the Community Board before the meeting.

Attach a separate diagram that indicates the location (name and address) and total number of

Revised: March 2015 Page 3 of 4

### LOCATION:

How many licensed establishments are within 1 block? o
How many On-Premise (OP) liquor licenses are within 500 feet? <u>0</u>
Is premise within 200 feet of any school or place of worship? ■ Yes ■ No

### **COMMUNITY OUTREACH:**

Please see the Community Board website to find block associations or tenant associations in the immediate vicinity of your location for community outreach. Applicants are encouraged to reach out to community groups. Also use provided petitions, which clearly state the name, address, license for which you are applying, and the hours and method of operation of your establishment at the top of each page. (Attach additional sheets of paper as necessary).

We are including the following questions to be able to prepare stipulations and have the meeting be faster and more efficient. Please answer per your business plan; do not plan to negotiate at the meeting.

- 1. I will close any front or rear facade doors and windows at 10:00 P.M. every night or during any amplified performances, including but not limited to DJs, live music and live nonmusical performances.
- 2. I will not have DJs, live music, promoted events, any event at which a cover fee is charged, scheduled performances, more than N/A DJs/ promoted events per N/A, more than TBD private parties per \_\_\_\_\_\_.
- 3. I will play ambient recorded background music only.
- 4. **I** Will not apply for an alteration to the method of operation agreed to by this stipulation without first coming before CB 3.
- 5. I will not seek a change in class to a full on-premise liquor license without first obtaining approval from CB 3.
- 6. I will not participate in pub crawls or have party buses come to my establishment.
- 7.  $\square$  I will not have a happy hour.  $\square$  I will have happy hour and it will end by  $\underline{8:00 \text{ Pm}}$ .
- 8. I will not have wait lines outside. There will be a staff person outside to monitor sidewalk crowds and ensure no loitering.
- 9. Residents may contact the manager/owner at the following phone number. Any complaints will be addressed immediately and I will revisit the above-stated method of operation if necessary in order to minimize my establishment's impact on my neighbors.

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# ATTENTION RESIDENTS & NEIGHBORS

Delancey 150 Inc. d/b/a Holiday Inn

Company/DBA Name and Contact Number for Questions

# Plans to open a

Restaurant

(Please choose) Bar/Restaurant/Club and indicate if there will be a Sidewalk Café or Backyard Garden

# at the following location

150 Delancey Street, New York, NY 10002

**Building Number and Street Name (Address)** 

# This establishment is seeking a license to serve

Beer- Wine- Liquor

Beer & Wine or Beer/Wine & Liquor

# There will be an opportunity for public comment on

Monday, July 11, 2016 at 6:30pm Thelma Burdick Community Room 10 Stanton Street (corner of Bowery)

Date/Time/Location

Eamon Donnelly (917) 416-7216 Joe Donagher (917) 417-1242

**Applicant Contact Information** 

# At COMMUNITY BOARD 3

SLA & DCA Licensing Committee Meeting info@cb3manhattan.org - www.cb3manhattan.org

# Petition to Support Proposed Liquor License

Date: June ,2016		
The following undersigned residents	of the area support the issuance of the	following liquor license (indicate
the type of license such as full-liquor	or beer-wine) Full liquor hotel dining	g room with rooftop dining
to the following applicant/establishm	nent (company and/or trade name) <u>De</u>	elancey 150 Inc. d/b/a Holiday Inn
Address of premises: 150 Delance		
	Bar Restaurant Other:	
The hours of operation will be: 8:00 AM- 4:00 AM Dining Room	1	
PLEASE NOTE: Signatures should be	from <u>residents</u> of building, adjoining b	uildings, and within 2-block area.
Other information regarding the lice		
Name	Signature	Address



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Gigi Li, Board Chair

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	Photographs of the inside and outside of the premise.									
	Schematics, floor plans or architectural drawings of the inside of the premise.									
A proposed food and or drink menu.										
	residential tenants at location and in buildings adjacent to, across the street from and behind									
	proposed location. Petition must give proposed hours and method of operation. For example:									
	restaurant, sports bar, combination restaurant/bar. (petition provided)									
	Notice of proposed business to block or tenant association if one exists. You can find									
	community groups and contact information on the CB 3 website:									
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	Photographs of proof of conspicuous posting of meeting with newspaper showing date.									
	If applicant has been or is licensed anywhere in City, letter from applicable community board indicating history of complaints and other comments.									
	mulcating history of complaints and other comments.									
Che	eck which you are applying for:									
	new liquor license  alteration of an existing liquor license  corporate change									
Che	eck if either of these apply:									
	cale of assets upgrade (change of class) of an existing liquor license									
	hur - 20, 2046									
Too	day's Date: June 28, 2016									
If a	nulving for calc of access you must being latter from gurrent owner confirming that you									
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	ocation currently licensed?   Yes   No Type of license:   OP Hotel Dining Room									
If al	lteration, describe nature of alteration:									
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Cor	poration and trade name of current license: Holiday Inn									
	PLICANT:									
Pre	mise address: 148-150 Delancey Street									
0										
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Nan										

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PREMISE:						
Type of building and number of floors: Hotel- 8 Stories, Plus Rooftop						
-		ed for the sale or consumption of alcoholic beverages? scribe and show on diagram:				
back or side yard u	se? □ Yes □ No What is	upancy and all appropriate permits, including for any maximum NUMBER of people permitted? Roof TBD				
		fe for rooftop to be obtained				
		rmit? □ Yes □ No (for rooftop)				
_	c zoning designation, such	g using map: <a href="http://gis.nyc.gov/doitt/nycitymap/">http://gis.nyc.gov/doitt/nycitymap/</a> - as R8 or C2):				
Will any other busi		hol service be conducted at premise? □ Yes □ No				
outdoor space) Mo	onday- Sunday 8am-4am	tion? (Specify days and hours each day and hours of				
Roo	oftop 12am-4am					
Number of tables?	10- Dining Room	Total number of seats? 52- Dining Room				
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(A <b>stand up bar</b> is pay for and receive	any bar or counter (whet e an alcoholic beverage)	ther with seating or not) over which a patron can order, 1): 1 Straight bar 10 Feet, Rooftop "L" 8ft x 12ft				
	e a full kitchen 🗖 Yes 🗖 No					
-		■ No (If any, show on diagram)				
	r sale? □ Yes □ No If yes	s, describe type of food and submit a menu				
What are the hours	s kitchen will be open? 6a	m-3am				
Will a manager or 1	principal always be on sit	e? ☐ Yes ☐ No If yes, which? Manager, Principal				
	ees will there be? 30					
		rs □ accordion doors or □ windows? No				
Will there be TVs/	monitors? 🗖 Yes 🗖 No (If	Yes, how many?) 4- Dining Room				
Will premise have	music? 🗖 Yes 🗖 No					

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If Yes, what type of music? □ Live musician □ DJ □ Juke box ☑ Tapes/CDs/iPod
If other type, please describe
What will be the music volume? ■ Background (quiet) ■ Entertainment level
Please describe your sound system: JVC Speakers
Will you host any promoted events, scheduled performances or any event at which a cover fee is
charged? If Yes, what type of events or performances are proposed and how often?
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How do you plan to manage vehicular traffic and crowds on the sidewalk caused by your establishment? Please attach plans. (Please do not answer "we do not anticipate congestion.")  Hotel security will be in front of hotel. Will unload and ask taxis to keep moving.
Will there be security personnel? □ Yes □ No (If Yes, how many and when) Two-4pm-4am
How do you plan to manage noise inside and outside your business so neighbors will not be affected? Please attach plans Principal and security guard will patrol rooftop and ask patrons to respect neighbors; signs will be places on table tops security cameras will be on rooftop
Do you have sound proofing installed? ■ Yes ■ No
If not, do you plan to install sound-proofing? □ Yes □ No Existing
APPLICANT HISTORY:
Has this corporation or any principal been licensed previously? ■ Yes ■ No
If yes, please indicate name of establishment: Holiday Inn- 585 8th Avenue
Address: Beer Authority- 300 West 40th, Rattle N Hum 14 East 33rd St Community Board #
Dates of operation: Barleycorn, 23 Park Place
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board indicating history of complaints or other comments.
Has any principal had work experience similar to the proposed business? $\blacksquare$ Yes $\blacksquare$ No $\:$ If Yes, please
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and describe type of business
Has any principal had SLA reports or action within the past 3 years? ☐ Yes ☐ No If Yes, attach list
of violations and dates of violations and outcomes, if any.

Attach a separate diagram that indicates the location **(name and address)** and total number of establishments selling/serving beer, wine (B/W) or liquor (OP) for 2 blocks in each direction. Please indicate whether establishments have On-Premise (OP) licenses. Please label streets and avenues and identify your location. Use letters to indicate **B**ar, **R**estaurant, etc. The diagram must be submitted with the questionnaire to the Community Board before the meeting.

Revised: March 2015 Page 3 of 4

### **LOCATION:**

How many licensed establishments are within 1 block? o
How many On-Premise (OP) liquor licenses are within 500 feet? <u> </u>
Is premise within 200 feet of any school or place of worship? ■ Yes ■ No

### **COMMUNITY OUTREACH:**

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# ATTENTION RESIDENTS & NEIGHBORS

Delancey 150 Inc. d/b/a Holiday Inn

**Company/DBA Name and Contact Number for Questions** 

# Plans to open a Rooftop Dining Area

(Please choose) Bar/Restaurant/Club and indicate if there will be a Sidewalk Café or Backyard Garden

at the following location

150 Delancey Street, New York, NY 10002

**Building Number and Street Name (Address)** 

This establishment is seeking a license to serve

Beer- Wine- Liquor

Beer & Wine or Beer/Wine & Liquor

There will be an opportunity for public comment on

Monday, July 11, 2016 at 6:30pm Thelma Burdick Community Room 10 Stanton Street (corner of Bowery)

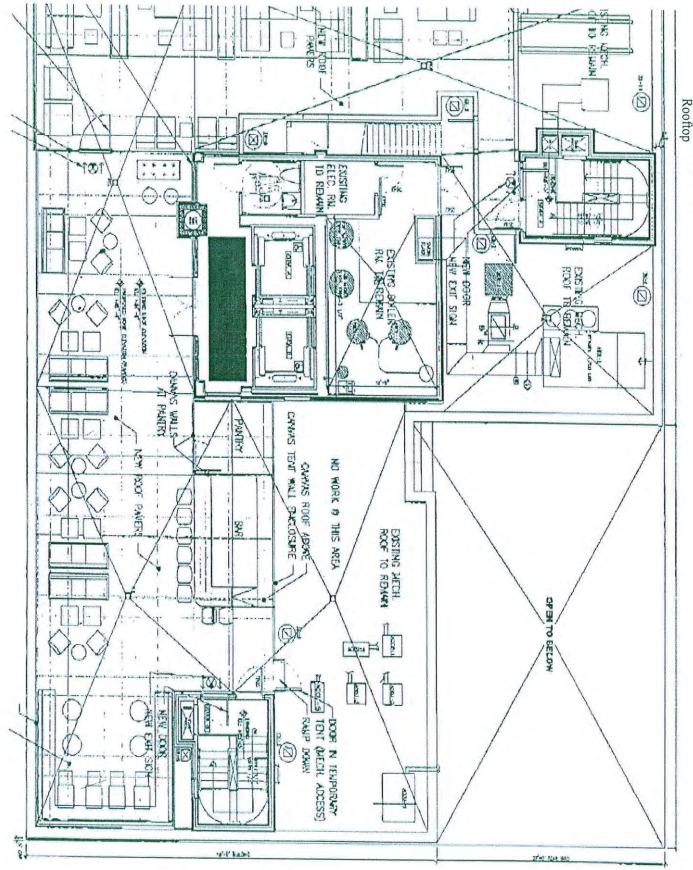
Eamon Donnelly (917) 416-7216 Joe Donagher (917) 417-1242

**Applicant Contact Information** 

At COMMUNITY BOARD 3 SLA & DCA Licensing Committee Meeting info@cb3manhattan.org - www.cb3manhattan.org

# Petition to Support Proposed Liquor License

The following undersigned residents of the area support the issuance of the following liquor license (indicate the type of license such as full-liquor or beer-wine) Full liquor rooftop dining  to the following applicant/establishment (company and/or trade name) Delancey 150 Inc. d/b/a Holiday Inn  Address of premises: 150 Delancey Street New York, NY 10002  This business will be a: (circle) Bar Restaurant Other:  Noon-4:00 AM Roof  PLEASE NOTE: Signatures should be from residents of building, adjoining buildings, and within 2-block area.  Other information regarding the license:  Name Signature Address	Date: June ,2016		
to the following applicant/establishment (company and/or trade name) Delancey 150 Inc. d/b/a Holiday Inn  Address of premises: 150 Delancey Street New York, NY 10002  This business will be a: (circle) Bar Restaurant Other:  The hours of operation will be: Noon-4:00 AM Roof  PLEASE NOTE: Signatures should be from residents of building, adjoining buildings, and within 2-block area.  Other information regarding the license:	The following undersigned residents	of the area support the issuance of the	following liquor license (indicate
Address of premises:150 Delancey Street New York, NY 10002  This business will be a: (circle) Bar Restaurant Other:  The hours of operation will be: Noon-4:00 AM Roof  PLEASE NOTE: Signatures should be from residents of building, adjoining buildings, and within 2-block area.  Other information regarding the license:	the type of license such as full-liquor	or beer-wine) Full liquor rooftop din	ing
Address of premises:150 Delancey Street New York, NY 10002  This business will be a: (circle) Bar Restaurant Other:  The hours of operation will be: Noon-4:00 AM Roof  PLEASE NOTE: Signatures should be from residents of building, adjoining buildings, and within 2-block area.  Other information regarding the license:			
This business will be a: (circle)  Bar Restaurant Other:  The hours of operation will be:  Noon-4:00 AM Roof  PLEASE NOTE: Signatures should be from residents of building, adjoining buildings, and within 2-block area.  Other information regarding the license:	to the following applicant/establishm	nent (company and/or trade name) <u>De</u>	elancey 150 Inc. d/b/a Holiday Inn
The hours of operation will be: Noon-4:00 AM Roof  PLEASE NOTE: Signatures should be from residents of building, adjoining buildings, and within 2-block area.  Other information regarding the license:			
Noon-4:00 AM Roof  PLEASE NOTE: Signatures should be from <u>residents</u> of building, adjoining buildings, and within 2-block area.  Other information regarding the license:		Bar Restaurant Other:	
Other information regarding the license:			
	PLEASE NOTE: Signatures should be	from <u>residents</u> of building, adjoining b	uildings, and within 2-block area.
Name Signature Address	Other information regarding the lice	nse:	
	Name	Signature	Address



d/b/a Holiday Inn 150 Delancey Street New York, NY 10002 Rooftop

mooM guinid New York, NY 10002 Delancey 150 Inc. d.b.a Holiday Inn 150 Delancey Street 1 DD 口口 1

# OOO=

N-SAT | 10AM-12AM

# STARTERS

FRIED QUESADILLA	SLIDERS.  3 Mini burgers, sautéed onion, pickle and our special in house sauce.  3 BBQ Pulled pork sliders with apple coleslaw.  3 Portobello mushroom sliders with Swiss cheese and arigula	FRIED CALAMARI	3 CHEESE POTATO SKINS\$12 Cheddar, mozzarella and jack cheese topped with bacon Add chili or broccoli \$3	NACHOS \$12 Fried tortilla chips, topped with pico de gallo; shredded cheese, sour cream, salsa and guacamole.   Add beef chili or chicken for an extra \$3;	WINGS.  8 big juicy wings cooked to your liking   Mild, Medium, Hot, Sweet Thai chili or BBQ	CHICKEN FINGERS	RATTLE N HUMMUS - REGULAR OR SPICY	SPINACH AND ARTICHOKE DIP\$12 Served with lortilla chips & pita.	MAC & CHEESE	IPA FRIES \$8 Fresh cut in house and brined in an IPA.	TATER TOTS\$8	LOADED FRIES / TOTS	PRETZEL NUGGETS \$10 Served with spicy mustard and cheese sauce.
FRIED QUI Grilled chic	SLIDERS 3 Mini burg. Add cheese 3 8 BBQ Pulle 3 Portobello	FRIED CAL Served with	3 CHEESE P Cheddar, mo Add chili or b	NACHOS Fried tortilla and guacame	WINGS 8 big juicy w	CHICKEN FI	RATTLE N H Served with o	Served with It	MAC & CHE	IPA FRIES Fresh cut in h	TATER TOTS	LOADED FRI With cheddar,	PRETZEL NU Served with sp

# FOOD SUN-SAT | 10AM-12AM

# SALADS

COBB SALAU
Iceberg lettuce tossed with ranch dressing topped with chicken, avocado, bacon,
crumbled blue cheese, onion, tomato and boiled eggs.

ROASTED BEET SALAD ......\$14 Roasted red and yellow beets, goat cheese, quinoa and arugula served with balsamic vinaigrette. CAESAR SALAD.......\$12
Romaine hearts tossed with homemade spicy Caesar dressing, garlic croutons and shaved parmesan.

4dd Chicken \$3, Shrimp \$5, Steak \$6

SOUTHWESTERN SALAD......\$12
Romaine hearts, sweet corn, cherry tomatoes, black beans, avocado, shredded cheddar cheese, fried tortilla strips and Russian dressing

Add Chicken \$3, Shrimp \$5, Steak \$6

# BURGERS & SANDWICHES

GRILLED CHEESE.......\$12 Ham, tomato and American cheese.

VEGGIE WRAP.......\$14
Grilled vegetables with fresh mozzarella in a balsamic glaze.

CHICKEN BLT.......\$14
Grilled chicken, lettuce, tomato, bacon, avocado and chipotle mayo served on toasted sourdough

BUFFALO CHICKEN CAESAR WRAP......\$14

All the taste of a Caesar salad with juicy buffalo strips and parmesan cheese

Grilled sliced steak, sautéed onions and mushrooms, Swiss cheese and baby arugula served on a French baguette.

\$5 Service charge and 18% Gratuity will be added to all room service orders 18% Gratuity will he added to any parties of 6 or more

**DI VERDE** \$\frac{\pi}{\pi}\$ sauce \$\frac{\pi}{\pi}\$ sauce \$\frac{\pi}{\pi}\$

SUN - SAT | 10AM - 12AM

# ENTREES

1/1		
1Y STRIP	2oz Grilled strip steak with peppercorn sauce served with mashed potatoes and	
47	toes	
	potal	_
:	hed	
	mas	
*****	with	
	rved	
******	se se	
	Sauc	
******	COTI	
74,780 850	pper	
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	strip	bles
<u>-</u>	lled	nixed vegetables
STR	z Gri	d ve
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GRILLED SALMON\$22.95	Grilled salmon served with roasted potatoes and sautéed spinach with a caper	
GRILLED SALMON	Grilled salmon served with roasted p	white wine sauce,

316.95	CULTY	٠.
V/	ade Irish	
***************************************	homema	
4 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -	and our	
*************	hite wine	
4 2 4 2 2 1 2 2 4 2 4 2 4 2 4 2 4 2 4 2	herbs, w	
***	st, fresh	pita
	en Breas	rice and
NCURE	ed Chick	ved with
RATTLE N CURRY\$16.95	Pan Seared Chicken Breast, fresh herbs, white wine and our homemade Irish curry	sauce served with rice and pita

\$18.95	perial	
SHEPHERD'S PIE\$18.95	Our signature shepherd's pie, fresh herbs & vegetables simmered in our imperial	stout infused gravy, topped with roasted creamy mashed potatoes
SP	she	grav
SHEPHERD	Our signature	stout infused

FISH AND CHIPS\$18.95	\$18,95	
cod rossed in season fibur & dipped in beer batter med to perfection served with colesiaw.	ection served with	

ΙΩ		
\$18.95	Served with spinach and cherry tomatoes in a garlic and basil white wine sauce,	
*****	white	
************	d basid	
*******	lic and	
****	a gar	
SHRIMP LINGUINI	natoes ir	
	herry tor	
	and c	
SHRIMP LINGUINI.	spinach	garlic bread on side.
MPLI	3 with	bread
SHRI	Serve	garic

# THIN CRUST PIZZAS

Available in 10" or 18"

CHEESE PIZZA\$12/\$20 Pizza sauce, mozzarella, basil & garlic
Add Tappings - \$2 per tapping   Extra cheese, blue cheese, goat cheese, spinach, mushrooms, peppers, onions
Add Toppings - \$3 per topping   Spicy sausage, bacon, pepperoni, ham, chicken
MARGARITA PIZZA\$12/\$20 Pizza sauce, fresh mozzarella and basil
:



# Certificate of Occupancy

CO Number:

110215035F

This certifies that the premises described herein conforms substantially to the approved plans and specifications and to the requirements of all applicable laws, rules and regulations for the uses and occupancies specified. No change of use or occupancy shall be made unless a new Certificate of Occupancy is issued. This document or a copy shall be available for inspection at the building at all reasonable times.

Α.	Borough: Manhattan  Address: 150 DELANCEY STREET  Building Identification Number (BIN): 10	04191	Block Number(s  Building Type  New	s): 36	Certificate Type: Effective Date:	Final 10/28/2015
	For zoning lot metes & bounds, please se	e BISWeb.				
В.	Construction classification:	1-C		(1968 Code)		
	Building Occupancy Group classification:	J-1		(1968 Code)		
	Multiple Dwelling Law Classification:	HAEB				
	No. of stories: 8	Height in	feet: 84		No. of dwelling uni	ts: 132
C.	Fire Protection Equipment: Standpipe system, Fire alarm system, Sprink	ler system			A	
D.	Type and number of open spaces: None associated with this filing.					
E.	This Certificate is issued with the following None	ig legal lim	itations:			
	Borough Comments: None					

Borough Commissioner

Commissioner

For Chandle



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Permissible	Use and Occupancy	
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All Building Code occupancy group designations are 1968 designations, except RES, COM, or PUB which are 1938 Building Code occupancy group designations.

Floor From To	Maximum persons permitted	lbs per	Building Code occupancy group	Dwelling or Rooming Units	Zoning use group	Description of use
CEL	30	OG	J-1		5	ACCESSORY MEETING ROOMS/ OFFICES/PANTRY
CEL	8	OG	J-1	***************************************	5	ACCESSORY FITNESS AREA
CEL		OG	D-2		5	MECHANICAL ROOMS, METER ROOMS
CEL	70	OG	F-4		6	EATING & DRINKING
001		50	J-1		5	HOTEL LOBBY
001	18	50	E		4	MEDICAL OFFICES
001	68	50	C		6	RETAIL
002		40	J-1	19	5	NINETEEN HOTEL ROOMS
003		40	J-1	19	5	NINETEEN HOTEL ROOMS
004		40	J-1	19	5	NINETEEN HOTEL ROOMS
005	A CONTRACTOR OF THE PARTY OF TH	40	J-1	19	5	NINETEEN HOTEL ROOMS
006		40	J-1	19	5	NINETEEN HOTEL ROOMS
007	MINING W	40	J-1	19	5	NINETEEN HOTEL ROOMS

Borough Commissioner

Commissioner

Led Chandley



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			Perm	issible Us	e and Oc	cupancy
All Build	ding Code	occupano are	y group des e 1938 Build	ignations ar	e 1968 des cupancy g	ignations, except RES, COM, or PUB which roup designations.
Floor From To	Maximum persons permitted	lbs per	Building Code occupancy group	Dwelling or Rooming Units	Zoning use group	Description of use
008		40	J-1 D-2	18	5	EIGHTEEN HOTEL ROOMS, MECHANICAL ROOMS
RO F	, L	100	D-2		5	BOILER ROOM
				END OF	SECTION	

Borough Commissioner

Commissioner

Fed Chandley